


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 03, 2003 8:00 am
Secretary of State

06-03-2003 90040 011 ***150.00

DOCUMENT # P02000064141	
1. Entity Name Mrs. T. Potts, Inc.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 104 E. Pine St.	3. Mailing Address 104 E. Pine St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Lakeland, FL	City & State Lakeland, FL	4. FEI Number 03-0475302	Applied For <input type="checkbox"/> Not Applicable
Zip 33801	Country USA	Zip 33801	Country USA
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name John Taylor	
	Street Address (P.O. Box Number is Not Acceptable) 121 Lakeview Dr.	
	City Auburndale	FL 33823

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Linda Taylor 121 Lakeview Dr. Auburndale, FL 33823	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V John Taylor 121 Lakeview Dr. Auburndale, FL 33823	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Shellie Mathews 237 Waterview Circle Auburndale, FL 33823	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **John Taylor** **John Taylor** **5-29-03** **863-967-0494**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

Attachment
Teapots, Tea & Accessories
Mrs. E. Potts, Inc.

80124126
P02000064141



Tea Room & Tea Shoppe

Phone 863-683-9033
Fax 863-967-7620
Email john041348@aol.com

104 E. Pine
Lakeland, FL 33801

May 29, 2003

Uniform Business Report
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

I did not receive the Uniform Business Report form and am therefore filing this report late.

Sincerely,

John Taylor
Vice-President

It's Always Tea Time at Mrs. E. Potts!